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20995 7590 05/20/2004

KNOBBE MARTENS OLSON & BEAR LLP  
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Sabine H. Lee

(Depositor's name)

(Signature)

(Date)

August 14, 2004

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/698,489	10/26/2000	Van L. Phillips	FLEXFT.146CP2	6577

TITLE OF INVENTION: FOOT PROSTHESIS HAVING CUSHIONED ANKLE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	08/20/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
JACKSON, SUZETTE JAMIE	3738	623-052000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	<input type="checkbox"/> Knobbe, Martens, Olson & Bear, LLP
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## (A) NAME OF ASSIGNEE

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## 4a. The following fee(s) are enclosed:

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(Date) 8-18-01

Sabine H. Lee Reg. No. 43,745 8/18/04  
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08/24/2004 MMEKONE1 00000043 09698489

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